

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

SUBMISSION OF SUBSTITUTE DECLARATION

APPLICANTS: Magnus Aström et al. CONFIRMATION NO. 6617

SERIAL NO.: 10/521,080 GROUP ART UNIT: 3766

FILED: January 12, 2005

TITLE: APPARATUS FOR ANALYZING CARDIAC EVENTS (As Amended)

MAIL STOP PCT

Commissioner for Patents

P.O. Box 1450

Alexandria, Virginia 22313-1450

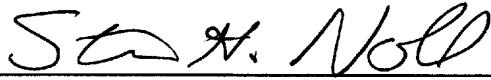
SIR:

In the Office Action dated July 18, 2007, a Substitute Declaration was required. Applicants responded to the merits of the July 18, 2007 Office Action on October 18, 2007, but at that time it had not been possible to obtain the signatures of the inventors on a Substitute Declaration. Those signatures now having been obtained, the Substitute Declaration is submitted herewith.

Applicants note that the Declaration originally filed upon entry into the national examination phase in the United States for this PCT application inadvertently included only the inventors Magnus Aström and Leif Sörnmo, and did not include the inventor Anders Björling, who is clearly identified as a co-inventor on all of the original PCT application papers. This omission has been corrected in the Substitute Specification. Since Mr. Björling is named as a co-inventor in all of the original PCT application papers, this does not constitute the addition of a new inventor, but merely conforms the currently filed Declaration to the original application papers.

The Commissioner is hereby authorized to charge any additional fees which may be required, or to credit any overpayment to account No. 501519.

Submitted by,



(Reg. 28,982)

Schiff, Hardin LLP, **CUSTOMER NO. 26574**
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Chicago, Illinois 60606
Attorneys for Applicants.

CH1\5328742.1

COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY
(Includes Reference to PCT International Applications)

ATTORNEY'S
DOCKET NUMBER
P04,0495

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name, I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural, names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

APPARATUS FOR ANALYZING CARDIAC EVENTS (AS AMENDED)

the specification of which (check only one item below):

is attached hereto.

was filed as United States application
Serial No. 10/521,080

on January 12, 2005

and was amended

on January 12, 2005 (if applicable).

was filed as PCT international application

Number _____

On _____

and was amended under PCT Article 19

on _____ (if applicable).

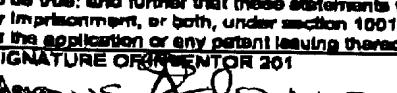
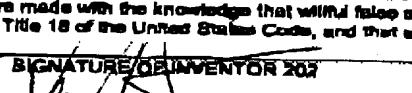
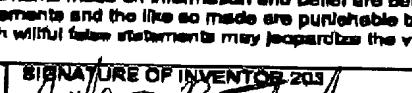
I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the patentability of this application in accordance with Title 37, Code of Federal Regulations, §1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed:

PRIOR FOREIGN/PCT APPLICATION(S) AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. 119:

COUNTRY (if PCT indicate "PCT")	APPLICATION NUMBER	DATE OF FILING (day, month, year)	PRIORITY CLAIMED UNDER 35 USC 119
Sweden	0301201-0	24 April 2003	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO

Combined Declaration For Patent Application and Power of Attorney (Continued) <small>(Includes Reference to PCT International Applications)</small>				ATTORNEY'S DOCKET NO. P04,0485	
<p>I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) or PCT International application(s) designating the United States of America that later(s) noted below and, insofar as the subject matter of each of the claims of this application is not disclosed in that/those prior application(s) in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56 which occurred between the filing date of the prior application(s) and the national or PCT International filing date of this application.</p>					
PRIOR U.S. APPLICATIONS OR PCT INTERNATIONAL APPLICATIONS DESIGNATING THE U.S. FOR BENEFIT UNDER 35 U.S.C. 120:					
U.S. APPLICATIONS			STATUS (Check one)		
U.S. APPLICATION NUMBER		U.S. FILING DATE	<input checked="" type="checkbox"/> PATENTED	<input type="checkbox"/> PENDING	
PCT APPLICATIONS DESIGNATING THE U.S.					
PCT APPLICATION NO		PCT FILING DATE	U.S. SERIAL NUMBERS ASSIGNED (if any)		
POWER OF ATTORNEY: As a named Inventor, I hereby appoint all Attorneys identified by United States Patent & Trademark Office Customer Number 26574, who are all members of the Firm Schiff Hardin LLP.					
Send Correspondence to: SCHIFF HARDIN LLP Patent Department Customer No. 26574 6800 Sears Tower, Chicago, Illinois 60606-6473				Direct Telephone Calls to: Steven H. Noll (312) 288-8780 SECOND GIVEN NAME	
2 0 1	FULL NAME OF INVENTOR ASTRÖM	FAMILY NAME CITY	FIRST GIVEN NAME MAGNUS	STATE OR FOREIGN COUNTRY Sweden	
	RESIDENCE & CITIZENSHIP Lund			COUNTRY OF CITIZENSHIP Sweden	
	POST OFFICE ADDRESS Spolec. 14A	POST OFFICE ADDRESS CITY	Lund	STATE & ZIP CODE/COUNTRY 8-222 20 Lund, Sweden	
2 0 2	FULL NAME OF INVENTOR SÖRNMÖ	FAMILY NAME CITY	FIRST GIVEN NAME LEIF	STATE OR FOREIGN COUNTRY Sweden	
	RESIDENCE & CITIZENSHIP Lund			COUNTRY OF CITIZENSHIP Sweden	
	POST OFFICE ADDRESS Bengt Lidforss väg 16	POST OFFICE ADDRESS CITY	Lund	STATE & ZIP CODE/COUNTRY 8-224 66 Lund, Sweden	
2 0 3	FULL NAME OF INVENTOR BJÖRLING	FAMILY NAME CITY	FIRST GIVEN NAME ANDERS	STATE OR FOREIGN COUNTRY SWEDEN	
	RESIDENCE & CITIZENSHIP Järfälla			COUNTRY OF CITIZENSHIP SWEDEN	
	POST OFFICE ADDRESS Handbollvägen 24G	POST OFFICE ADDRESS CITY	Järfälla	STATE & ZIP CODE/COUNTRY 9-175 67 Järfälla, Sweden	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.					
SIGNATURE OF INVENTOR 201 		SIGNATURE OF INVENTOR 202 		SIGNATURE OF INVENTOR 203 	
DATE	10/29/2007	DATE	11/08/2007	DATE	Nov 20, 2007
<small>70-1381 (REV 01-84)</small>					